PTO/SB/06 (07-06)

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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 |  |   |                                       |   |   |   |   | Application or Docket Number<br>10/550,824 |   |    | ing Date<br>20/2006   | To be Mailed           |  |
|---|--|---|---------------------------------------|---|---|---|---|--|---|----|-----------------------|------------------------|--|
| APPLICATION AS FILED – PART I (Column 1) (Column 2)                     |  |   |                                       |   |   |   |   |  | OTHER THAN SMALL ENTITY □ OR SMALL ENTITY |    |                       |                        |  |
| FOR NUMBER  |  |   |                                       | LED   | NUI                                     | MBER EXTRA  |   | RATE (\$)                                  | FEE (\$)                                  | П  | RATE (\$)             | FEE (\$)               |  |
| ×   | BASIC FEE<br>(37 CFR 1.16(a), (b),   | or (c))                                   | N/A                                   |   | N/A                                     |   | ı | N/A  |   | 1  | N/A                   | 300                    |  |
| ×   | SEARCH FEE<br>(37 CFR 1.16(k), (i),  | or (m))                                   | N/A                                   |   | N/A                                     |   | l | N/A  |   |    | N/A                   | 400                    |  |
| ×   | EXAMINATION FE<br>(37 CFR 1.16(a), (p),  |   | N/A                                   |   | N/A                                     |   | l | N/A  |   |    | N/A                   | 200                    |  |
|   | FAL CLAIMS<br>CFR 1.16(i))   |   | 16 minus 20 =                         |   |   |   | П | x \$ =                                     |   | OR | X \$50 =              | 0                      |  |
| IND<br>(37  | EPENDENT CLAIM<br>CFR 1.16(h))   | S   | 1 m                                   | inus 3 =                                    | • 0                                     |   | 1 | x \$ =                                     |   | 1  | X \$200 =             | 0                      |  |
|   | APPLICATION SIZE<br>(37 CFR 1.16(s))   | FEE she is \$2 add                        | ets of pap<br>250 (\$125<br>tional 50 | er, the a<br>for sma<br>sheets o            | pplication<br>Il entity)<br>or fraction | drawings exceed 100<br>blication size fee due<br>entity) for each<br>fraction thereof. See<br>and 37 CFR 1.16(s). |   |  |   |    |                       |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))                       |  |   |                                       |   |   |   |   |  |   | ]  |                       |                        |  |
| * If  | * If the difference in column 1 is less than zero, enter "0" in column 2.  |   |                                       |   |   |   |   |  |   | 1  | TOTAL                 | 900                    |  |
|   | APP  | OED – F                                   |                                       | OTHER THAN SMALL ENTITY OR SMALL ENTITY     |   |   |   |  |   |    |                       |                        |  |
| AMENDMENT   | 09/14/2007   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |   | PRESENT<br>EXTRA  |   | RATE (\$)                                  | ADDITIONAL<br>FEE (\$)                    |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |  |
|   | Total (37 CFR<br>1.18())   | · 16                                      | Minus                                 | ·· 20                                       |   | = 0   | l | x \$ =                                     |   | OR | X \$50=               | 0                      |  |
|   | Independent<br>(37 CFR 1.16(h))  | • 1                                       | Minus                                 | 3   |   | = 0   | 1 | x \$ =                                     |   | OR | X \$200=              | 0                      |  |
|   | Application Size Fee (37 CFR 1.16(s))  |   |                                       |   |   |   |   |  |   |    |                       |                        |  |
| `   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))  |   |                                       |   |   |   |   |  |   | OR |                       |                        |  |
|   |  |   |                                       |   |   |   |   | TOTAL<br>ADD'L<br>FEE                      |   | OR | TOTAL<br>ADD'L<br>FEE | 0                      |  |
| (Column 1) (Column 2) (Column 3)  |  |   |                                       |   |   |   |   |  |   |    |                       |                        |  |
| L   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | NUI<br>PREV                                 | HEST<br>MBER<br>IOUSLY<br>D FOR         | PRESENT<br>EXTRA  |   | RATE (\$)                                  | ADDITIONAL<br>FEE (\$)                    |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |  |
| Ä   | Total (37 CFR<br>1,16(i))  |   | Minus                                 | **  |   | =   | П | x \$ =                                     |   | OR | x s =                 |                        |  |
| AMENDMENT   | Independent<br>(37 CFR 1,16(h))  |   | Minus                                 | ***   |   |   | l | x \$ =                                     |   | OR | x s =                 |                        |  |
| 핆   | Application Size Fee (37 CFR 1.16(s))  |   |                                       |   |   |   |   |  |   | ]  |                       |                        |  |
| ΑM  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))  |   |                                       |   |   |   |   |  |   | OR |                       |                        |  |
|   |  |   |                                       |   |   |   |   |  |   | OR | TOTAL<br>ADD'L<br>FEE |                        |  |
| **  | " If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1. |   |                                       |   |   |   |   |  |   |    |                       |                        |  |

has collection of information is organic by 37 CFR. 1,10. The information is required to obtain or retain a benefit by the public which is in the final representation of the process and any potential or Confederation (and ordination) is operand by 38 US C. 122 and 37 CFR. 14. This collection is estimated to the bit 2 transitions to complete in excluding pathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this borton, should be sent to the Child referendation (Clinic U.S. Plantin and Trinderiank Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.